

TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	09/641,553
Filing Date	August 17, 2000
First Named Inventor	Wang, et al.
Group Art Unit	2157
Examiner Name	Barot Bharat
Attorney Docket Number	141388.05

☐ Sent via Express Mail
Label No.:

ENCLOSURES (check all that apply)

☒ Fee Transmittal Form (in duplicate;
\$0.00 total fee)

☐ Fee Attached

☒ Supplemental Response to OA dated
08/12/05 (7 pages)

☒ After Final

☐ Affidavits/declaration(s)

☐ Extension of Time Request

☐ Express Abandonment Request

☐ Information Disclosure Statement with
Form PTO/SB/08A (pages)

☐ Response to Notice to File Missing Parts
☐ A copy of the Notice to File Missing
Parts Under 37 CFR 1.52 or 1.5

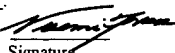
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☐ transmitted by facsimile on the date shown below
to the USPTO at (703) _____

November 10, 2005
Date


Signature
Noemi Tovar
Printed Name

☐ Assignment Papers
(for an Application)

☐ Drawing(s) (sheets)

☐ Declaration

☐ Newly Executed (pages)

☐ A copy from a prior application
(37 CFR 1.63(d)) (pages)

☐ Licensing-related Papers

☐ Petition

☐ Petition to Convert to a Provisional
Application

☐ General Power of Attorney (SB80)
☐ 37 CFR 3.73(b) Statement

☐ Terminal Disclaimer

☐ Request for Refund

☐ CD, Number of CD(s) _____

☐ After Allowance Communication to TC

☐ Appeal Communication to Board of
Appeals and Interferences

☐ Appeal Communication to TC
(Appeal Notice, Brief, Reply Brief)

☐ Proprietary Information

☐ Status Letter

☐ Application Data Sheet

☐ Request for Corrected Filing Receipt

☒ Return Receipt Postcard


☒ Other Enclosure(s) (please identify
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☒ A copy of this transmittal form;

☐
☐
☐
☐

Remarks ☒ The Commissioner is hereby authorized to charge any additional
fees required, or credit any overpayments, to Deposit Account No. 50-
0463 for the above identified patent application.

SIGNATURE OF ATTORNEY OR AGENT

Signature		Reg. No.	38,222
Name of Attorney or Agent	David S. Lee		
Date	November 10, 2005	Tel.	(425) 703-8092
		Facsimile No.	(425) 708-5046
Assignee Name:	MICROSOFT CORPORATION ONE MICROSOFT WAY REDMOND, WA 98052		
Customer Number:	22971		

Effective on 12/08/04 Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). <div style="font-size: 2em; font-weight: bold; text-align: center;">FEE TRANSMITTAL</div> <div style="font-size: 1.5em; font-weight: bold; text-align: center;">For FY 2005</div>		Complete if Known															
<div style="border: 1px solid black; border-radius: 50%; padding: 10px; display: inline-block; text-align: center;"> NOV 14 2005 RECEIVED </div>		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>Application Number</td><td>09/641,553</td></tr> <tr><td>Filing Date</td><td>August 17, 2000</td></tr> <tr><td>First Named Inventor</td><td>Wang, et al.</td></tr> <tr><td>Examiner Name</td><td>Barot Bharat</td></tr> <tr><td>Art Unit</td><td>2157</td></tr> <tr><td>Attorney Docket No.</td><td>141388.05</td></tr> <tr><td>Express Mail Label No.</td><td>N/A</td></tr> </table>		Application Number	09/641,553	Filing Date	August 17, 2000	First Named Inventor	Wang, et al.	Examiner Name	Barot Bharat	Art Unit	2157	Attorney Docket No.	141388.05	Express Mail Label No.	N/A
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Art Unit	2157																
Attorney Docket No.	141388.05																
Express Mail Label No.	N/A																
Applicant claims small entity status. See 37 CFR 1.27 TOTAL AMOUNT OF PAYMENT (\$) 0.00		METHOD OF PAYMENT (check all that apply)															
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____																	
<input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 50-0463 Deposit Account Name: MICROSOFT CORPORATION																	
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)																	
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee																	
<input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments																	
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.																	
FEE CALCULATION																	
1. BASIC FILING, SEARCH, AND EXAMINATION FEES																	
Application Type	FILING FEES Small Entity Fee (\$)	FILING FEES Small Entity Fee (\$)	SEARCH FEES Small Entity Fee (\$)	SEARCH FEES Small Entity Fee (\$)	EXAMINATION FEES Small Entity Fee (\$)	EXAMINATION FEES Small Entity Fee (\$)	Fees Paid (\$)										
Utility	300	150	500	250	200	100	_____										
Design	200	100	100	50	130	65	_____										
Plant	200	100	300	150	160	80	_____										
Reissue	300	150	500	250	600	300	_____										
Provisional	200	100	0	0	0	0	_____										
2. EXCESS CLAIM FEES				Small Entity													
Fee Description						Fee (\$)	Fee (\$)										
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent						50	25										
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent						200	100										
Multiple dependent claims						360	180										
Total Claims		Extra Claims		Fee (\$)		Fee Paid (\$)											
16 - 18 or HP = 0		x 50		= 0													
HP = highest number of total claims paid for, if greater than 20																	
Indep. Claims		Extra Claims		Fee (\$)		Fee Paid (\$)											
2 - 3 or HP = 0		x 200		= 0													
HP = highest number of independent claims paid for, if greater than 3																	
3. APPLICATION SIZE FEE																	
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).																	
Total Sheets		Extra Sheets		Number of each additional 50 or fraction thereof		Fee (\$)	Fee Paid (\$)										
-100 = 0		/ 50 = 0		(round up to a whole) number x		250	= 0										
4. OTHER FEE(S)				Fees Paid (\$)													
Non-English Specification, \$130 fee (no small entity discount)				0													
Other: _____				0													
SUBMITTED BY																	
Signature				Registration No. (Attorney/Agent) 38,222		Telephone (425) 703-8092											
Name (Print/Type)		David S. Lee				Date November 10, 2005											

AF/ JAW

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



Application Serial No.: 09/641,553
Filing Date: August 17, 2000
Inventors: Wang, *et al.*
Applicant: Microsoft Corporation
Group Art Unit: 2157
Examiner: Barot Bharat
Confirmation No.: 6337
Applicant's Docket No.: 141388.05
Title: Weak Leader Election

SUPPLEMENTAL RESPONSE TO THE FINAL OFFICE ACTION OF AUGUST 12, 2005
AMENDMENT

To: MS: AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

From: David S. Lee
Customer No. 22971

Sir:

In response to the Final Office Action of August 12, 2005, in connection with the above-identified application, the following amendments and remarks are respectfully submitted. Favorable consideration is respectfully requested.